



Glenda Ritz, NBCT
Indiana Superintendent of Public Instruction

CHOICE SCHOOL SPECIAL EDUCATION ASSURANCES FORM 2014-2015 School Year

In accordance with Section 11 of the Emergency Rule (LSA# 13-421(E)) each Choice School serving Choice Scholarship students with disabilities is required to sign the following assurances.

The Choice School assures that:

1. Choice School staff will inform the parent(s) of a student with a disability about the special education and related services available from the Choice School so that the parent is able to make an informed choice in selecting either the Choice School or the public school to provide special education and related services to the student.
2. Choice School staff will collaborate with the student's parent(s) to develop the student's Choice School Education Plan.
3. Each student's Choice School Education Plan will be in writing and will be implemented only after obtaining the parent's written consent.
4. Choice School staff will inform the parents of: (a) the requirement that the plan can be implemented only with the parent's written consent; (b) the parent's right to revoke the consent; and (c) the consequences of revoking consent.
5. Progress reports will be provided to the student's parent(s) as described in the Choice School Education Plan.

Signature of Authorized Agent: _____ Date: _____

Printed Name and Title of Authorized Agent: _____

Choice School: _____

Choice School State Assigned ID Number: _____